Rev. 06/06 City of Milwaukee
Dept of Employee Relations

2007 Rate Chart For Active Employees

This Chart applies to all Employees whose positions are represented by any of the following units:

General City Management

COMPUTATION METHOD OF "CITY SHARE"

The CITY will pay, monthly, 100% of the lowest single or lowest family HMO premium cost to the City. For 2007, this contribution ("City Share") will be no more than \$452.37 (Single) or \$1,235.26 (Family) toward the cost of Health Plan of your choice. Any excess premium over these amounts ("Employee Share") will be deducted as a payroll deduction from the second paycheck of each month.

Chart I - 2007 Monthly Health Plan Rates

HEALTH PLAN	SINGLE PREMIUM	CITY SHARE	SINGLE EMPLOYEE SHARE	FAMILY PREMIUM	CITY SHARE	FAMILY EMPLOYEE SHARE
HMO Select (Humana)	\$452.37	\$452.37	No Cost	\$1,235.26	\$1,235.26	No Cost
Premier HMO (Humana)	\$844.61	\$452.37	\$392.24	\$2,305.76	\$1,235.26	\$1,070.50
Basic Plan	\$636.63	\$452.37	\$184.26	\$1,434.77	\$1,235.26	\$199.51
Basic Plan Tier 1	\$509.31	\$452.37	\$56.94	\$1,360.52	\$1,235.26	\$125.26

Chart II - 2007 Monthly Dental Plan Rates

DENTAL PLAN	SINGLE PREMIUM	CITY SHARE	SINGLE EMPLOYEE SHARE	FAMILY PREMIUM	CITY SHARE	FAMILY EMPLOYEE SHARE
WPS/Delta Dental	\$26.31	\$13.00	\$13.31	\$90.62	\$37.50	\$53.12
Care-Plus	\$31.41	\$13.00	\$18.41	\$91.49	\$37.50	\$53.99
DentalBlue	\$31.69	\$13.00	\$18.69	\$95.07	\$37.50	\$57.57
First Commonwealth	\$32.82	\$13.00	\$19.82	\$99.03	\$37.50	\$61.53

The Uniform Benefits for the Basic Plan & Basic Plan Tier 1 plans and the HMOs are not the same. Be sure to review the information in the blue Open Enrollment Booklet.